

CITY OF SOMERVILLE

Commonwealth of Massachusetts 93 Highland Avenue Somerville, MA 02143 (617) 625-6600

2016 APR 27 P 3: 15

Application to Renew Taxi Medallion License

ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886 License #:

BL15-000407

File #:

15-326

Fee:

305

Review and update the information below. <u>If you have workers compensation insurance, attach proof showing the insurer and policy number.</u> Then sign the Acknowledgment and return this form with your fee to the City Clerk's Office.

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: ALEWIFE TRANSPORTATION COMPANY INC Business Location: 0 OUT OF AREA Business Phone: 978-423-8775	
License Holder: ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886	
Mailing Address: ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886	
Business Type: Corporation JOHN DASILVA JOHN DASILVA JOHN DASILVA	
FID: 043247085	
Emergency Contact: JOHN DASILVA Phone: 978-423-8775	
Medallion #(s): MEDALLION #65	

ı	hereby	certify	under t	he penal	ties of	perjury	that th	he fol	lowing	is true:
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- -All information shown above is true and accurate.
- -Any changes above are subject to the approval of the BOARD OF ALDERMEN.
- -I have filed all State tax returns and paid all State taxes required by law for this business.



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ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 License #:

BL15-000408

File #:

15-326

305

WESTFORD MA 01886 Fee:

Review and update the information below. <u>If you have workers compensation insurance</u>, <u>attach proof showing the insurer and policy number</u>. Then sign the Acknowledgment and return this form with your fee to the City Clerk's Office.

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
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Business Type: Corporation JOHN DASILVA JOHN DASILVA JOHN DASILVA	
FID: 043247085	
Emergency Contact: JOHN DASILVA Phone: 978-423-8775	
Medallion #(s): MEDALLION #69	

١	hereby	certify	under	the	penalties	of	perjury	that	the	following	is	true:	

- -All information shown above is true and accurate.
- -Any changes above are subject to the approval of the BOARD OF ALDERMEN.
- -I have filed all State tax/returns and paid all State taxes required by law for this business.

 Signature:
 Happy Market
 Date:
 4/25/16

 Printed Name:
 John Da Silva
 Phone:
 978-423-8775



CITY OF SOMERVILLE

Commonwealth of Massachusetts 93 Highland Avenue Somerville, MA 02143 (617) 625-6600

2016 APR 27 P 3: 15

Application to Renew Taxi Medallion License

ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886 License #:

BL15-000409

File #:

15-326

Fee:

305

Review and update the information below. <u>If you have workers compensation insurance, attach proof showing the insurer and policy number.</u> Then sign the Acknowledgment and return this form with your fee to the City Clerk's Office.

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: ALEWIFE TRANSPORTATION COMPANY INC Business Location: 0 OUT OF AREA Business Phone: 978-423-8775	
License Holder: ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886	
Mailing Address: ALEWIFE TRANSPORTATION COMPANY INC PO BOX 1676 WESTFORD MA 01886	
Business Type: Corporation JOHN DASILVA JOHN DASILVA JOHN DASILVA	
FID: 043247085	
Emergency Contact: JOHN DASILVA Phone: 978-423-8775	
Medallion #(s): MEDALLION #80	

I hereby	certify	y under the	penalties o	f perjury	that the	following	is true:
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- -All information shown above is true and accurate.
- -Any changes above are subject to the approval of the BOARD OF ALDERMEN.
- -I have filed all State tax returns and paid-all State taxes required by law for this business.

 Signature:
 Date:
 4/25/15

 Printed Name:
 Date:
 978-423-8775